

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF NEW YORK

FILED
IN CLERK'S OFFICE
U.S. DISTRICT COURT E.D.N.Y.

★ JAN 30 2012 ★

Rosalie Soller
Dave Kenneth Soller

LONG ISLAND OFFICE

CV 12-0167 (SJF(WDW))
**AMENDED
COMPLAINT**

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

Jury Trial: ☒ Yes ☐ No

1. Badge #5972
2. John Doe (2nd Policeman)
3. Road Supervisor #436
4. Social Services Representative
5. Suffolk County Police Dept.
6. Suffolk County Police Dept. chief executive

7. County of Suffolk executive
8. County of Suffolk
9. TOWN of Smithtown

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff:

Name Rosalie Soller and Dave Kenneth Soller
Street Address 120 Terry Road
County, City Smithtown
State & Zip Code N.Y. 11787
Telephone Number 631-724-1545

- B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

1. Badge #5972
 2. John Doe (2nd policeman)
- 4th Precinct
Sector 412
Car No. 416
Hamlet - Smithtown

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EDNY OFFICE

Defendant No. 3 Name Road Supervisor #436
 7. County of Suffolk executive
 8. County of Suffolk
 9. Town of Smithtown
 Street Address _____
 County, City _____
 State & Zip Code _____
 Telephone Number _____

Defendant No. 4 Name Social Services Representative
 Street Address _____
 County, City _____
 State & Zip Code _____
 Telephone Number _____

Defendant No. 5 Name Suffolk County Police Dept.
 Street Address _____
 County, City _____
 State & Zip Code _____
 Telephone Number _____

Defendant No. 6 Name Suffolk County Police Dept. chief exec.
 Street Address _____
 County, City _____
 State & Zip Code _____
 Telephone Number _____

II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

- A. What is the basis for federal court jurisdiction? (check all that apply)
- ☒ Federal Questions
 ☐ Diversity of Citizenship
- B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? 1983 ruling, 4th amendments rights violated, civil Rts, No one was missing over 24 hrs, civil liberties were violated, no search warrant
- C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?
- Plaintiff(s) state(s) of citizenship _____
- Defendant(s) state(s) of citizenship _____

III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? 120 Terry Rd.
Smithtown NY

B. What date and approximate time did the events giving rise to your claim(s) occur? _____

January 9, 2009
started approximately between 3:50pm and 11:50pm

C. Facts: started when 2 policemen broke down
back door and questioned Dave Kenneth
about alleged death of parents,
they entered 2 times Jan 9, 2009.

What
happened
to you?

Who did
what?

Road Supervisor #436 forcibly broke
down back door with policeman.

Was anyone
else
involved?

Social Services Representative came
to house relating to Jan. 9, 2009
incident with a false report.

Who else
saw what
happened?

Defendants 5-9 are responsible also,
and are liable.

IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. _____

1. accused Dave Kenneth of
- alleged murder (trauma)
2. defamation
3. false imprisonment in house
4. excessive questioning
5. wrongful accusations
6. humiliation
7. mental anguish
8. frightened
9. harassment
10. unlawful detained
11. threat to well being

V. Relief:

State what you want the Court to do for you and the amount of monetary compensation if any, you are seeking, and the basis for such compensation. _____

1. unlawful entry
2. invasion of privacy of house
3. undue aggravation
4. violated our rights
5. intimidation
6. false accusation and interrogation of alleged murder
7. legal expenses
8. improper police action

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 30th day of January, 20 12

Signature of Plaintiff

Mailing Address

Telephone Number

Fax Number (if you have one)

Paulie Heller + David Hunter
120 Perry Road
Smithtown NY 11787

631-724-1545

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoner must also provide their inmate numbers, present place of confinement, and address.